

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Mooney for Congress

ADDRESS (number and street) ▼

PO Box 1863



Check if different than previously reported. (ACC)

Martinsburg

WV

25402

2. FEC IDENTIFICATION NUMBER ▼

C C00506774

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

WV

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

10 01 / 2015

through

M M / D D / Y Y Y Y

12 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Peter Onoszko

Signature of Treasurer

Peter Onoszko

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 19 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 84

Write or Type Committee Name

Mooney for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	113868.50	705197.69
(b) Total Contribution Refunds (from Line 20(d))	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	113868.50	704997.69
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	53619.21	375563.12
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2104.18
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	53619.21	373458.94
8. Cash on Hand at Close of Reporting Period (from Line 27).....	320820.81	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	25934.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 84

Write or Type Committee Name

Mooney for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

45120.00

340990.13

(ii) Unitemized.....

10349.50

63690.63

(iii) TOTAL of contributions from individuals ▶

55469.50

404680.76

(b) Political Party Committees.....

999.00

2699.00

(c) Other Political Committees (such as PACs).....

57400.00

297817.93

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

113868.50

705197.69

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

2104.18

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

113868.50

707301.87

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 84

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	53619.21	375563.12
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	2000.00	16700.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	200.00
21. OTHER DISBURSEMENTS	0.00	5282.07
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	55619.21	397745.19

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	262571.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	113868.50
25. SUBTOTAL (add Line 23 and Line 24).....	376440.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	55619.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	320820.81

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 84

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

MICHAEL AMERY

A.

Mailing Address 20308 TROLLEY CROSSING CT

City

MONTGOMERY VILLAGE

State

MD

Zip Code

20886-5838

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN ACADEMY OF NEUROLOGY

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12117

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TORIN ANDREWS

B.

Mailing Address 9639 DOCTOR PERRY ROAD

208

City

IJAMSVILLE

State

MD

Zip Code

21754-8758

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : SA11.12160

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TORIN ANDREWS

C.

Mailing Address 9639 DOCTOR PERRY ROAD

208

City

IJAMSVILLE

State

MD

Zip Code

21754-8758

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : SA11.12161

Amount of Each Receipt this Period

1200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 84

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

JOHNNIE C. BAKER**A.**Mailing Address **PO BOX 163**

City

WRIGHTSVILLE BEACH

State

NC

Zip Code

28480-0163FEC ID number of contributing
federal political committee.**C**

Name of Employer

ENVIRONMENTAL CHEMISTS INC.

Occupation

EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12107

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PERRY BALLARD**B.**Mailing Address **143 TASLEY CT.**

City

MARTINSBURG

State

WV

Zip Code

25403-FEC ID number of contributing
federal political committee.**C**

Name of Employer

BALLARD SAFETY LLC

Occupation

PRESIDENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11915

Amount of Each Receipt this Period

400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SAMANTHA ERIN BALOTIN**C.**Mailing Address **24640 HARBOUR VIEW DR.**

City

PONTE VEDRA

State

FL

Zip Code

32082-1501FEC ID number of contributing
federal political committee.**C**

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		28		2015

Transaction ID : SA11.12057

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**1475.00****TOTAL** This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)
KIMBERLY BELLISSIMO

Mailing Address 1155 15TH ST. NW,
 SUITE 410

City	State	Zip Code
WASHINGTON	DC	20005-2748

FEC ID number of contributing
federal political committee.

C

Name of Employer
 BASE CONNECT

Occupation
 MARKETING EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		09		2015

Transaction ID : SA11.11873

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
ANDREW BEMUS

Mailing Address 67 TIMBERVIEW DR

City	State	Zip Code
HARPERS FERRY	WV	25425-5685

FEC ID number of contributing
federal political committee.

C

Name of Employer
 PHIA, LLC

Occupation
 OPERATIONS ANALYST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11913

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
ANDREW BEMUS

Mailing Address 67 TIMBERVIEW DR

City	State	Zip Code
HARPERS FERRY	WV	25425-5685

FEC ID number of contributing
federal political committee.

C

Name of Employer
 PHIA, LLC

Occupation
 OPERATIONS ANALYST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11928

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 84

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

CRAIG BLAIR

Mailing Address 47 WASSER DRIVE

City

MARTINSBURG

State

WV

Zip Code

25403-0885

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUNSET WATER, INCOccupation
SELF EMPLOYED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11911

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WALTER BOARDWINE

Mailing Address PO BOX 1935

City

GRAND JUNCTION

State

CO

Zip Code

81502-

FEC ID number of contributing
federal political committee.

C

Name of Employer
VA MEDICAL CENTER GRAND JUNCTIONOccupation
ORTHOPEDIC SURGEON

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2015

Transaction ID : SA11.12031

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ANDREW BOOTH

Mailing Address 8402 HILDA DR

City

SALISBURY

State

MD

Zip Code

21804-2282

FEC ID number of contributing
federal political committee.

C

Name of Employer
AWB ENGINEERSOccupation
ENGINEER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12113

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 84

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
HOWARD BOWENMailing Address **9651 OLD NATIONAL PIKE**

City	State	Zip Code
HAGERSTOWN	MD	21740-1553

FEC ID number of contributing
federal political committee.

C

Name of Employer
EWING OIL COMPANYOccupation
EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2015

Transaction ID : SA11.12015

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
ELIZABETH BRYDENMailing Address **1 W 67TH ST**

City	State	Zip Code
NEW YORK	NY	10023-6200

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

815.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : SA11.11976

Amount of Each Receipt this Period

305.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
PATRICK CAINMailing Address **4 PARK ST.**

City	State	Zip Code
ELKINS	WV	26241-3939

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : SA11.12038

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1055.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 84

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

MARGARET A. CHAPPELL

A.

Mailing Address 22 PRINCETON CT

City

BASKING RIDGE

State

NJ

Zip Code

07920-4248

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

RET.

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11927

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ELLONIE CLARK

B.

Mailing Address 3716 MAPLEWOOD AVE.

City

DALLAS

State

TX

Zip Code

75205-2827

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2015

Transaction ID : SA11.12139

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ELLONIE CLARK

C.

Mailing Address 3716 MAPLEWOOD AVE.

City

DALLAS

State

TX

Zip Code

75205-2827

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2015

Transaction ID : SA11.12140

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 84

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
THOMAS W. COLOMB
 Mailing Address 1001 MARINA DR. APT. 613

City State Zip Code
 QUINCY MA 02171-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer
 MURPHY HESSE TOOMEY & LEHANE LLP

Occupation
 ATTORNEY

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
 4200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 12 21 2015

Transaction ID : SA11.12148

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL DYE
 Mailing Address 1315 HAWKINS LN

City State Zip Code
 ANAPOLIS MD 21401-4212

FEC ID number of contributing
federal political committee.

C

Name of Employer
 RAYTHEON

Occupation
 ENGINEER

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 09 2015

Transaction ID : SA11.11880

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. RITA F. EAVES
 Mailing Address 2499 FIVE SHILLINGS RD.

City State Zip Code
 FREDERICK MD 21701-9325

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 10 2015

Transaction ID : SA11.11926

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2030.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 84

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

BRUCE EBERLE

Mailing Address 1449 MONTAGUE DR.

City
 VIENNA

State
 VA

Zip Code
 22182-1440

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 EBERLE COMMUNICATIONS GROUP, INC.

Occupation
 DIRECT MARKETING

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 12 17 2015

Transaction ID : SA11.12041

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. MARIO A. ESPOSITO

Mailing Address 25239 S. GREYHAWK COURT

City
 CHANNAHON

State
 IL

Zip Code
 60410-5560

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 SELF

Occupation
 ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

650.00

Date of Receipt

M M / D D / Y Y Y Y
 12 28 2015

Transaction ID : SA11.12052

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

KAREN S. EVANS

Mailing Address 218 FIREFLY LANE

City
 MARTINSBURG

State
 WV

Zip Code
 25403-1068

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 SELF

Occupation
 CONSULTANT(RETIRED FED)

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2250.00

Date of Receipt

M M / D D / Y Y Y Y
 12 14 2015

Transaction ID : SA11.12025

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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PAGE 13 OF 84

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

JOHN FITZGERALD

Mailing Address 11411 ROCKVILLE PIKE

City

N. BETHESDA

State

MD

Zip Code

20852-5911

FEC ID number of contributing
federal political committee.

C

Name of Employer
JJF MANAGEMENTOccupation
CHAIRMAN

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		14		2015

Transaction ID : SA11.12022

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBERT FLUHARTY

Mailing Address 400 WHITE OAK BLVD

City

CHARLESTON

State

WV

Zip Code

26330-

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEPTOW-JOHNSONOccupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		16		2015

Transaction ID : SA11.11963

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBERT FLUHARTY

Mailing Address 400 WHITE OAK BLVD

City

CHARLESTON

State

WV

Zip Code

26330-

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEPTOW-JOHNSONOccupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		16		2015

Transaction ID : SA11.11967

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 84
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
MR. ALLEN J. FURTH**A.** Mailing Address 3 KING CHARLES PL.City State Zip Code
ANNAPOLIS MD 21401-2622FEC ID number of contributing
federal political committee.

C

Name of Employer
BERKEL & COMPANYOccupation
ENGINEERReceipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
11 09 2015

Transaction ID : SA11.11870

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MIKE GIAMPIETRO

Mailing Address 11286 WOODHAVEN DR.

City State Zip Code
IJAMSVILLE MD 21754-8810FEC ID number of contributing
federal political committee.

C

Name of Employer
M&T BANKOccupation
MORTGAGE BANKERReceipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y
12 31 2015

Transaction ID : SA11.12167

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEFAN GLEASON

Mailing Address P.O. BOX 49246

City State Zip Code
CHARLOTTE NC 28277-0076FEC ID number of contributing
federal political committee.

C

Name of Employer
ASCENSION MARKETING GROUPOccupation
MARKETINGReceipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y
11 16 2015

Transaction ID : SA11.11979

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4950.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
MR. KINGDON GOULD

Mailing Address 7861 MURRAY HILL RD

City	State	Zip Code
LAUREL	MD	20723-5716

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		09		2015

Transaction ID : SA11.11866

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
BARBARA R. GRIMALDI

Mailing Address PO BOX 6040

City	State	Zip Code
MIRAMAR BEACH	FL	32550-1001

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		19		2015

Transaction ID : SA11.11962

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
THOMAS HALLORAN

Mailing Address 2506 KANAWHA AVE SE

City	State	Zip Code
CHARLESTON	WV	25304-1026

FEC ID number of contributing
federal political committee.

C

Name of Employer
AQUA-CLEAR, INC.Occupation
MANAGER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : SA11.12168

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1650.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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PAGE 16 OF 84

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

MR. DAVID HARTY**A.**

Mailing Address 198 PRIDES CROSSING

City

SHENANDOAH JUNCTIO

State

WV

Zip Code

25442-4573

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORTHROP GRUMMAN

Occupation

ENGINEER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11909

Amount of Each Receipt this Period

400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. DAVID HARTY**B.**

Mailing Address 198 PRIDES CROSSING

City

SHENANDOAH JUNCTIO

State

WV

Zip Code

25442-4573

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORTHROP GRUMMAN

Occupation

ENGINEER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11924

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MATTHEW L. HARVEY**C.**

Mailing Address 122 CATALINA POINTE

City

MARTINSBURG

State

WV

Zip Code

25403-7914

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : SA11.12080

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

DONALD HOFFMAN

Mailing Address 13301 MANOR STONE DRIVE

City

GERMANTOWN

State

MD

Zip Code

20874-3567

FEC ID number of contributing
federal political committee.

C

Name of Employer

EXCEL SERVICES CORPORATION

Occupation

NUCLEAR ENGINEER PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11.12170

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM B. HOTALING

Mailing Address 125 QUASSAICK AVE

City

NEW WINDSOR

State

NY

Zip Code

12553-6635

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2015

Transaction ID : SA11.11951

Amount of Each Receipt this Period

600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ARCHIBALD R. HOXTON

Mailing Address PO BOX 448

City

SHEPHERDSTOWN

State

WV

Zip Code

25443-

FEC ID number of contributing
federal political committee.

C

Name of Employer

HFI WEALTH MANAGEMENT

Occupation

FINANCIAL ADVISOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11910

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

ARCHIBALD R. HOXTONMailing Address **PO BOX 448**

City

SHEPHERDSTOWN

State

WV

Zip Code

25443-FEC ID number of contributing
federal political committee.**C**

Name of Employer

HFI WEALTH MANAGEMENT

Occupation

FINANCIAL ADVISOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11916

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ARCHIBALD R. HOXTONMailing Address **PO BOX 448**

City

SHEPHERDSTOWN

State

WV

Zip Code

25443-FEC ID number of contributing
federal political committee.**C**

Name of Employer

HFI WEALTH MANAGEMENT

Occupation

FINANCIAL ADVISOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		27		2015

Transaction ID : SA11.12157

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CLAUDIA HRVATINMailing Address **1823 NEWTON ST NW #208**

City

WASHINGTON

State

DC

Zip Code

20010-1036FEC ID number of contributing
federal political committee.**C**

Name of Employer

KING AND SPALDING LLC

Occupation

ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12124

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**2200.00**

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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PAGE 19 OF 84

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

MARY LORETAN JACKSON

A.

Mailing Address 6923 ALPHA RD.

City

DALLAS

State

TX

Zip Code

75240-3601

FEC ID number of contributing
federal political committee.

C

Name of Employer

CASH AMERICA INTERNATIONAL

Occupation

VP OF PUBLIC & GOVERNMENT RELATION

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12116

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

REBECCA A. KEEVER-TAYLOR

B.

Mailing Address 249 SAYRE LN

City

EVANS

State

WV

Zip Code

25241-8015

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

655.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2015

Transaction ID : SA11.12009

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

REBECCA A. KEEVER-TAYLOR

C.

Mailing Address 249 SAYRE LN

City

EVANS

State

WV

Zip Code

25241-8015

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

655.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12058

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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PAGE 20 OF 84

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

MR. BOB LAWRENCE

Mailing Address 1610 N SALISBURY BLVD.

City

SALISBURY

State

MD

Zip Code

21801-3329

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

338.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2015

Transaction ID : SA11.11943

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HERBERT ALAN LEVIN

Mailing Address 724 E GRINNELL DR.

City

BURBANK

State

CA

Zip Code

91501-1720

FEC ID number of contributing federal political committee.

C

Name of Employer

DEPARTMENT OF JUSTICE

Occupation

LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2015

Transaction ID : SA11.11955

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HAROLD G. LIPPERT

Mailing Address PO BOX 965

City

FORT BENTON

State

MT

Zip Code

59442-0965

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		27		2015

Transaction ID : SA11.12155

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

375.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

ANGELO LUINA

Mailing Address 4380 VIREO AVE APT 3I

City

BRONX

State

NY

Zip Code

10470-

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2015

Transaction ID : SA11.12006

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ANGELO LUINA

Mailing Address 4380 VIREO AVE APT 3I

City

BRONX

State

NY

Zip Code

10470-

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2015

Transaction ID : SA11.12151

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HENRY MADLEY

Mailing Address 3648 62ND AVE. E.

City

BRADENTON

State

FL

Zip Code

34203-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : SA11.12042

Amount of Each Receipt this Period

30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

130.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
HENRY MADLEY

Mailing Address 3648 62ND AVE. E.

City	State	Zip Code
BRADENTON	FL	34203-5429

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2015

Transaction ID : SA11.12152

Amount of Each Receipt this Period

30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
CLIFFORD E. MARSTILLER

Mailing Address PO BOX 2606

City	State	Zip Code
ELKINS	WV	26241-

FEC ID number of contributing
federal political committee.

C

Name of Employer
INNOVATIVE INVESTMENTSOccupation
FINANCIAL ADVISOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		17		2015

Transaction ID : SA11.12039

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
IVETTE V. MARTINEZ

Mailing Address 2825 VIXEN LANE

City	State	Zip Code
SILVER SPRING	MD	20906-

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12127

Amount of Each Receipt this Period

300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

830.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 84
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial) MARK MCIVER		Date of Receipt M M / D D / Y Y Y Y 11 / 16 / 2015	
Mailing Address 26144 NANTICOKE ROAD		Transaction ID : SA11.11965	
City SALISBURY	State MD	Zip Code 21801-8213	Amount of Each Receipt this Period 500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer SELF	Occupation SELF		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

B. Full Name (Last, First, Middle Initial) ANASTASIA MICHAELS		Date of Receipt M M / D D / Y Y Y Y 12 / 29 / 2015	
Mailing Address PO BOX 454		Transaction ID : SA11.12122	
City FREDERICK	State MD	Zip Code 21705-0454	Amount of Each Receipt this Period 250.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer SELF	Occupation ATTORNEY		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

C. Full Name (Last, First, Middle Initial) MR. PATRICK MOONEY		Date of Receipt M M / D D / Y Y Y Y 11 / 10 / 2015	
Mailing Address 8550 TOUCHTON RD APT 1621		Transaction ID : SA11.11922	
City JACKSONVILLE	State FL	Zip Code 32216-2220	Amount of Each Receipt this Period 1000.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer SELF-EMPLOYED	Occupation WRITER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
JACK MULLINS
 Mailing Address 224 RIDGEWOOD DR

City State Zip Code
 VICTORIA TX 77901-2572

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y
 12 14 2015

Transaction ID : SA11.12027

Amount of Each Receipt this Period

50.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
J.MICHAEL MURPHY
 Mailing Address 630 VASSAR STREET #2501

City State Zip Code
 ORLANDO FL 32804-5370

FEC ID number of contributing
federal political committee.

C

Name of Employer
 RETIRED

Occupation
 RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 12 09 2015

Transaction ID : SA11.11997

Amount of Each Receipt this Period

150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PETER ONOSZKO
 Mailing Address 13 AUBREY CT

City State Zip Code
 CHARLES TOWN WV 25414-3809

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 RETIRED

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

950.00

Date of Receipt

M M / D D / Y Y Y Y
 11 10 2015

Transaction ID : SA11.11923

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
A. LUCAS J. PAVLOVICH

Mailing Address 27 PINEVIEW DR.

City	State	Zip Code
ELKINS	WV	26241-

FEC ID number of contributing
federal political committee.

C

Name of Employer
TYGART VALLEY ORTHOPEDICSOccupation
DOCTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2015

Transaction ID : SA11.12032

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. STEPHEN PEROUTKA

Mailing Address 153 MASON CROSSING COURT

City	State	Zip Code
SEVERNA PARK	MD	21146-1752

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
ATTORNEY

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2015

Transaction ID : SA11.11878

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. PETER PLAMONDON

Mailing Address 13903 CARLSON FARM DR

City	State	Zip Code
GERMANTOWN	MD	20874-4481

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLAMONDON COMPANYOccupation
BOARD CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2015

Transaction ID : SA11.12023

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

MICHELLE M. PURDY**A.**

Mailing Address 11 LEFT CHERRY FRK

City

MONTROSE

State

WV

Zip Code

26283-

FEC ID number of contributing federal political committee.

C

Name of Employer
PURDY FARMS LLCOccupation
OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : SA11.12036

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MICHELLE PUTNAM**B.**

Mailing Address HC 70 BX 71

City

HARMAN

State

WV

Zip Code

26270-

FEC ID number of contributing federal political committee.

C

Name of Employer
PUTNAM PA SERVICES LLCOccupation
PRINCIPAL

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2015

Transaction ID : SA11.12033

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HAROLD QUINN**C.**Mailing Address 101 CONSTITUTION AVE., NW
500 EAST

City

WASHINGTON

State

DC

Zip Code

20001-2133

FEC ID number of contributing federal political committee.

C

Name of Employer
NATIONAL MINING ASSOCIATIONOccupation
ASSOCIATION EXECUTIVE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11.12174

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

BRANDON RIPPEON

Mailing Address 10319 WESTLAKE DR

City

BETHESDA

State

MD

Zip Code

20817-6403

FEC ID number of contributing
federal political committee.

C

Name of Employer

CASHBANQUE

Occupation

BANKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		16		2015

Transaction ID : SA11.11980

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

NANCY B. ROTH

Mailing Address 8545 CARMEL VALLEY RD.

City

CARMEL

State

CA

Zip Code

93923-9556

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11888

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

NANCY B. ROTH

Mailing Address 8545 CARMEL VALLEY RD.

City

CARMEL

State

CA

Zip Code

93923-9556

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2015

Transaction ID : SA11.12017

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1450.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

FREDRIC SCHLUTER

Mailing Address 2433 GOLFSIDE DRIVE

City

NAPLES

State

FL

Zip Code

34110-7000

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2015

Transaction ID : SA11.12018

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

L. PENDLETON SIEGEL

Mailing Address 2230 W. RIVERSIDE, #101

City

SPOKANE

State

WA

Zip Code

99201-1442

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		11		2015

Transaction ID : SA11.12014

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

STANLEY SIENKIEWICZ

Mailing Address 5540 30TH ST NW

City

WASHINGTON

State

DC

Zip Code

20015-1250

FEC ID number of contributing federal political committee.

C

Name of Employer

US INTERNATIONAL DEVELOPMENT

Occupation

FEDERAL GOVERNMENT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : SA11.12176

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

MR. BAKER SMITH

Mailing Address 3360 E TERRELL BRANCH CT

City

MARIETTA

State

GA

Zip Code

30067-5164

FEC ID number of contributing federal political committee.

C

Name of Employer
BDO CONSULTINGOccupation
MANAGEMENT CONSULTANT

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : SA11.12178

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CHRISTOPHER SAX SMITH

Mailing Address 22 CAPITOL STREET

City

CHARLESTON

State

WV

Zip Code

25301-2824

FEC ID number of contributing federal political committee.

C

Name of Employer
HOYER HOYER & SMITH PLLCOccupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		09		2015

Transaction ID : SA11.11991

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

RICHARD D. SMITH

Mailing Address 3113 N INGLEWOOD ST

City

ARLINGTON

State

VA

Zip Code

22207-1545

FEC ID number of contributing federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2015

Transaction ID : SA11.12019

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

375.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

RICHARD D. SMITH

Mailing Address 3113 N INGLEWOOD ST

City

ARLINGTON

State

VA

Zip Code

22207-1545

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		28		2015

Transaction ID : SA11.12048

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

RICHARD D. SMITH

Mailing Address 3113 N INGLEWOOD ST

City

ARLINGTON

State

VA

Zip Code

22207-1545

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2015

Transaction ID : SA11.12142

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

LEE SNYDER

Mailing Address 270 INDUSTRIAL BLVD.

City

KEARNEYSVILLE

State

WV

Zip Code

25430-2774

FEC ID number of contributing
federal political committee.

C

Name of Employer

SNYDER ENVIROMENTAL

Occupation

OWNER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2015

Transaction ID : SA11.12138

Amount of Each Receipt this Period

700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

770.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

LEE SNYDER

Mailing Address 270 INDUSTRIAL BLVD.

City

KEARNEYSVILLE

State

WV

Zip Code

25430-2774

FEC ID number of contributing federal political committee.

C

Name of Employer
SNYDER ENVIROMENTALOccupation
OWNER

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2015

Transaction ID : SA11.12186

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SHAFIC SRAJ

Mailing Address 44 OVERLOOK DR.

City

BRIDGEPORT

State

WV

Zip Code

26330-1022

FEC ID number of contributing federal political committee.

C

Name of Employer
STONEWALL JACKSON MEMORIAL HOSPITVOccupation
PHYSICIAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : SA11.12179

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM STEWART

Mailing Address P.O. BOX 159

City

STEVENSON

State

MD

Zip Code

21153-0159

FEC ID number of contributing federal political committee.

C

Name of Employer
ASSET STRATEGY CONSULTANTSOccupation
INVESTMRNT CONSULTING

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		19		2015

Transaction ID : SA11.11942

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

LEWIS SUBELSKY

Mailing Address 123 LOOKOUT RDG

City
HEDGESVILLE

State Zip Code
WV 25427-

FEC ID number of contributing
 federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

12 / 21 / 2015

Transaction ID : SA11.12132

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JOHN PARKER SWEENEY

Mailing Address 4440 WILLARD AVE
 APT 1109

City
CHEVY CHASE

State Zip Code
MD 20815-3768

FEC ID number of contributing
 federal political committee.

C

Name of Employer
BRADLEY ARANT BOULT CUMMINGS

Occupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

11 / 16 / 2015

Transaction ID : SA11.11964

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JOHN PARKER SWEENEY

Mailing Address 4440 WILLARD AVE
 APT 1109

City
CHEVY CHASE

State Zip Code
MD 20815-3768

FEC ID number of contributing
 federal political committee.

C

Name of Employer
BRADLEY ARANT BOULT CUMMINGS

Occupation
LAWYER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

11 / 16 / 2015

Transaction ID : SA11.11966

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
MARK SZANCA

Mailing Address **123 CAMELOT BLVD**

City State Zip Code
FALLING WATERS WV 25419-

FEC ID number of contributing
federal political committee.**C**Name of Employer
SZANCA SOLUTIONS, INC.Occupation
PRESIDENT/CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12120

Amount of Each Receipt this Period

400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RICHARD TOPPING

Mailing Address **1 FOREST BROOK DR.**

City State Zip Code
ELKINS WV 26241-

FEC ID number of contributing
federal political committee.**C**Name of Employer
TYGART VALLEY ORTHOPEDICSOccupation
ORTHOPEDIC SURGEON

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2015

Transaction ID : SA11.12147

Amount of Each Receipt this Period

750.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
TERI TOPPING

Mailing Address **1 FOREST BROOK DR.**

City State Zip Code
ELKINS WV 26241-3391

FEC ID number of contributing
federal political committee.**C**Name of Employer
HOMEMAKEROccupation
HOMEMAKER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : SA11.12189

Amount of Each Receipt this Period

850.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....**2000.00**

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
JEARL D. WALKER

Mailing Address 6917 BAL LAKE DR

City State Zip Code
FORT WORTH TX 76116-8017

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
NONE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		09		2015

Transaction ID : SA11.11986

Amount of Each Receipt this Period

30.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
D.J. WILLARD JR.

Mailing Address P.O. DRAWER 180

City State Zip Code
FREDERICK MD 21705-0180

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
FINANCE

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12104

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM WILLIAMS

Mailing Address 13761 BALMORAL GREENS AVENUE

City State Zip Code
CLIFTON VA 20124-2803

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORELIANCE CORP.Occupation
CHAIRMAN

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : SA11.12183

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2980.00

45120.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
HOUGH FOR SENATE

Mailing Address 326 W POTOMAC ST.

City BRUNSWICK	State MD	Zip Code 21716-1136
-------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

999.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12123

Amount of Each Receipt this Period

999.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

999.00

999.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

AIRCREFT OWNERS AND PILOTS ASSOCIATION POLITICAL A

Mailing Address 421 AVIATION WAY

City	State	Zip Code
FREDERICK	MD	21701-4756

FEC ID number of contributing federal political committee.

C C00131185

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2015

Transaction ID : SA11.12044

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. ALPHA NATURAL RESOURCES PACMailing Address 1301 PENNSYLVANIA AVE. NW
SUITE 404

City	State	Zip Code
WASHINGTON	DC	20004-1730

FEC ID number of contributing federal political committee.

C C00348524

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : SA11.12097

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. AMERICAN ACADEMY OF ORTHOPEDIC SURGEONS

Mailing Address 317 MASSACHUSETTS AVE. NE

City	State	Zip Code
WASHINGTON	DC	20002-5769

FEC ID number of contributing federal political committee.

C C00343137

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2015

Transaction ID : SA11.12021

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

ARCH PAC

Mailing Address **ONE CITY PLACE DR.**

City

ST. LOUIS

State

MO

Zip Code

63141-7014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

12 / 29 / 2015

Transaction ID : SA11.12075

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T

Mailing Address **208 S AKARD ST**

City

DALLAS

State

TX

Zip Code

75202-4206

FEC ID number of contributing
federal political committee.

C C00109017

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

12 / 17 / 2015

Transaction ID : SA11.12040

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

COALPAC

Mailing Address **101 CONSTITUTION AVE. NW SUITE 500**

City

WASHINGTON

State

DC

Zip Code

20001-2133

FEC ID number of contributing
federal political committee.

C C00109819

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

12 / 30 / 2015

Transaction ID : SA11.12098

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

COLUMBIA PIPELINE GROUP, INC. PAC

Mailing Address 10 G ST NE

City State Zip Code
D.C. DC 20002-4213

FEC ID number of contributing
federal political committee.

C C00575340

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y
11 09 2015

Transaction ID : SA11.11881

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

COLUMBIA PIPELINE GROUP, INC. PAC

Mailing Address 10 G ST NE

City State Zip Code
D.C. DC 20002-4213

FEC ID number of contributing
federal political committee.

C C00575340

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y
12 14 2015

Transaction ID : SA11.12029

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CONSOL ENERGY INC. PAC

Mailing Address C/O COMERICA BANK, PAC SERVICES
P.O. BOX 75000, MC2250

City State Zip Code
DETROIT MI 48275-0001

FEC ID number of contributing
federal political committee.

C C00279331

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
12 29 2015

Transaction ID : SA11.12072

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 PENNSYLVANIA AVE NW

City	State	Zip Code
D.C.	DC	20004-2601

FEC ID number of contributing
federal political committee.**C** C00007880

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		28		2015

Transaction ID : SA11.12051

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DOMINION PAC

Mailing Address P.O. BOX 26666

City	State	Zip Code
RICHMOND	VA	23261-6666

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12062

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

EAGLE FORUM PAC

Mailing Address PO BOX 618

City	State	Zip Code
ALTON	IL	62002-0618

FEC ID number of contributing
federal political committee.**C** C00103937

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		21		2015

Transaction ID : SA11.12131

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

7000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
EQT CORPORATION PAC

Mailing Address **EQT PLAZA**
625 LIBERTY AVE. SUITE 1700

City **PITTSBURGH** State **PA** Zip Code **15222-3120**

FEC ID number of contributing federal political committee. **C C00151175**

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M / D D / Y Y Y Y
12 14 2015

Transaction ID : **SA11.12020**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FIRSTENERGY CORP. POLITICAL ACTION COMMITTEE

Mailing Address **76 S MAIN ST**

City **AKRON** State **OH** Zip Code **44308-1812**

FEC ID number of contributing federal political committee. **C C00140855**

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt

M M / D D / Y Y Y Y
12 30 2015

Transaction ID : **SA11.12096**

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FULL HOUSE PAC

Mailing Address **PO BOX 530520**

City **HENDERSON** State **NV** Zip Code **89053-0520**

FEC ID number of contributing federal political committee. **C C00541128**

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt

M M / D D / Y Y Y Y
11 10 2015

Transaction ID : **SA11.11932**

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)
FULL HOUSE PAC

Mailing Address **PO BOX 530520**

City HENDERSON	State NV	Zip Code 89053-0520
--------------------------	--------------------	-------------------------------

FEC ID number of contributing
federal political committee.

C **C00541128**

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

11 / **10** / **2015**

Transaction ID : SA11.12188

Amount of Each Receipt this Period

400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE

Mailing Address **25 MASSACHUSETTS AVE NW**

City D.C.	State DC	Zip Code 20001-1430
---------------------	--------------------	-------------------------------

FEC ID number of contributing
federal political committee.

C **C00076810**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

12 / **11** / **2015**

Transaction ID : SA11.12001

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address **101 CONSTITUTION AVE NW**

City D.C.	State DC	Zip Code 20001-2133
---------------------	--------------------	-------------------------------

FEC ID number of contributing
federal political committee.

C **C00096156**

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3917.93

Date of Receipt

11 / **09** / **2015**

Transaction ID : SA11.11865

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

MARLIN PAC

Mailing Address 250 W 600 N

City

HOWE

State

IN

Zip Code

46746-9476

FEC ID number of contributing
federal political committee.

C C00492868

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : SA11.11995

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACT

Mailing Address 1850 M ST NW

City

D.C.

State

DC

Zip Code

20036-5803

FEC ID number of contributing
federal political committee.

C C00130773

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11931

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC

Mailing Address 1605 KING ST

City

ALEXANDRIA

State

VA

Zip Code

22314-2726

FEC ID number of contributing
federal political committee.

C C00089458

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : SA11.12088

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

8500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
POARCH BAND OF CREEK INDIANS

Mailing Address 5811 JACK SPRINGS RD.

City	State	Zip Code
ATMORE	AL	36502-5025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12076

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PRICewaterhouseCOOPERS POLITICAL ACTION COMMITTEE

Mailing Address 600 13TH ST NW

City	State	Zip Code
D.C.	DC	20005-3005

FEC ID number of contributing
federal political committee.

C C00107235

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11930

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PRICewaterhouseCOOPERS POLITICAL ACTION COMMITTEE

Mailing Address 600 13TH ST NW

City	State	Zip Code
D.C.	DC	20005-3005

FEC ID number of contributing
federal political committee.

C C00107235

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : SA11.12073

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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 NAME OF COMMITTEE (In Full)
Mooney for Congress

 Full Name (Last, First, Middle Initial)
A. REGIONS FINANCIAL CORPORATION POLITICAL ACTION COM

Mailing Address 1015 15TH ST NW

City	State	Zip Code
D.C.	DC	20005-2605

FEC ID number of contributing federal political committee.

C C00432252

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11933

Amount of Each Receipt this Period

500.00

CONTRIBUTION

 Full Name (Last, First, Middle Initial)
B. REPUBLICAN MAINSTREET PARTNERSHIP PAC

Mailing Address 2201 WISCONSIN AVE NW

City	State	Zip Code
D.C.	DC	20007-4105

FEC ID number of contributing federal political committee.

C C00165159

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : SA11.11917

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

 Full Name (Last, First, Middle Initial)
C. THE TEA PARTY LEADERSHIP FUND

Mailing Address 203 S UNION ST

City	State	Zip Code
ALEXANDRIA	VA	22314-3355

FEC ID number of contributing federal political committee.

C C00520825

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2015

Transaction ID : SA11.12049

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Mooney for Congress

Full Name (Last, First, Middle Initial)

TOYOTA MOTOR NORTH AMERICA, INC. PAC

Mailing Address 601 THIRTEENTH ST. NW, STE. 910 S

City
 WASHINGTON

State
 DC

Zip Code
 20005-3807

FEC ID number of contributing
federal political committee.

C C00542365

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 12 11 2015

Transaction ID : SA11.12000

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TOYOTA MOTOR NORTH AMERICA, INC. PAC

Mailing Address 601 THIRTEENTH ST. NW, STE. 910 S

City
 WASHINGTON

State
 DC

Zip Code
 20005-3807

FEC ID number of contributing
federal political committee.

C C00542365

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 12 21 2015

Transaction ID : SA11.12150

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TURKISH COALITON USA PAC (TC-USA PAC)

Mailing Address 1025 CONNECTICUT AVE NW

City
 D.C.

State
 DC

Zip Code
 20036-5405

FEC ID number of contributing
federal political committee.

C C00432526

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 12 29 2015

Transaction ID : SA11.12077

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Mooney for Congress

A. Full Name (Last, First, Middle Initial)
US CUBA DEMOCRACY PAC

Mailing Address 1200 WEST 49TH STREET

City State Zip Code
HIALEAH FL 33012-3217

FEC ID number of contributing
federal political committee.

C C00387720

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

11 / 09 / 2015

Transaction ID : SA11.11867

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
VALERO PAC

Mailing Address P.O. BOX 696000

City State Zip Code
SAN ANTONIO TX 78269-6000

FEC ID number of contributing
federal political committee.

C C00109546

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

12 / 30 / 2015

Transaction ID : SA11.12099

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
VALERO PAC

Mailing Address P.O. BOX 696000

City State Zip Code
SAN ANTONIO TX 78269-6000

FEC ID number of contributing
federal political committee.

C C00109546

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

12 / 30 / 2015

Transaction ID : SA11.12100

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

6000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Mooney for CongressFull Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PAC)

Mailing Address 1300 I ST. NW - 4TH FLOOR

City	State	Zip Code
WASHINGTON	DC	20005-3314

FEC ID number of contributing
federal political committee.**C** C00186288

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	10	/	2015

Transaction ID : SA11.11935

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

57400.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. JESSICA CARTER

Mailing Address 303 SHAWNEE CIRCLE

City	State	Zip Code
CHARLESTON	WV	25304

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2015

Amount of Each Disbursement this Period

3645.00

Transaction ID : SB17.I1234

B. JESSICA CARTER

Mailing Address 303 SHAWNEE CIRCLE

City	State	Zip Code
CHARLESTON	WV	25304

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2015

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.I1292

C. BRIAN CHATWIN

Mailing Address 6608 INDEPENDENCE AVE.

City	State	Zip Code
SPRINGFIELD	VA	22151

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		23		2015

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.I1306

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

9145.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I1218

B. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I1244

C. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		16		2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I1294

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I1295

B. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I1296

C. STEPHANIE COOPER

Mailing Address P.O. BOX 785

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I1297

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. KEVIN HAGERTY

Mailing Address 4948 SHEPHERDSTOWN RD.

City	State	Zip Code
MARTINSBURG	WV	25404

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

111.47

Transaction ID : SB17.I1212

STAPLES - OFFICE SUPPLIES

B. KEVIN HAGERTY

Mailing Address 4948 SHEPHERDSTOWN RD.

City	State	Zip Code
MARTINSBURG	WV	25404

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2015

Amount of Each Disbursement this Period

26.30

Transaction ID : SB17.I1224

OFFICE DEPOT-OFFICE SUPPLIES

C. KEVIN HAGERTY

Mailing Address 4948 SHEPHERDSTOWN RD.

City	State	Zip Code
MARTINSBURG	WV	25404

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2015

Amount of Each Disbursement this Period

117.80

Transaction ID : SB17.I1233

OFFICE DEPOT- OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

255.57

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. KEVIN HAGERTY

Mailing Address 4948 SHEPHERDSTOWN RD.

City	State	Zip Code
MARTINSBURG	WV	25404

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2015

Amount of Each Disbursement this Period

48.30

Transaction ID : SB17.I1236

STAPLES-OFFICE SUPPLIES

B. KEVIN HAGERTY

Mailing Address 4948 SHEPHERDSTOWN RD.

City	State	Zip Code
MARTINSBURG	WV	25404

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2015

Amount of Each Disbursement this Period

128.04

Transaction ID : SB17.I1257

STAPLES - OFFICE SUPPLIES

C. KEVIN HAGERTY

Mailing Address 4948 SHEPHERDSTOWN RD.

City	State	Zip Code
MARTINSBURG	WV	25404

Purpose of Disbursement
REIMBURSEMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		09		2015

Amount of Each Disbursement this Period

117.24

Transaction ID : SB17.I1278

OFFICE SUPPLIES/GAS

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

293.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. TERI TOPPING

Mailing Address 1 FOREST BROOK DR.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

City	State	Zip Code
ELKINS	WV	26241-3391

Amount of Each Disbursement this Period

850.00

Transaction ID : SB17.12189

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. 7-ELEVEN

Mailing Address 23 JEFFERSON AVE.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Amount of Each Disbursement this Period

19.00

Transaction ID : SB17.11213

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. 7-ELEVEN

Mailing Address 23 JEFFERSON AVE.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		24		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Amount of Each Disbursement this Period

31.00

Transaction ID : SB17.11308

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

900.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD. MD 5675

City	State	Zip Code
FORT WORTH	TX	76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2015

Amount of Each Disbursement this Period

414.20

Transaction ID : SB17.I1217

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD. MD 5675

City	State	Zip Code
FORT WORTH	TX	76155

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		21		2015

Amount of Each Disbursement this Period

256.90

Transaction ID : SB17.I1225

C. AMWAY

Mailing Address 419 NEW JERSEY AVE. SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		16		2015

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.I1290

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

871.10

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 55 OF 84

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. AT&T MOBILITY

Mailing Address PO BOX 536216

City	State	Zip Code
ATLANTA	GA	30353

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		21		2015

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.I1300

B. BP GAS STATION

Mailing Address 1224 TJ JACKSON DR.

City	State	Zip Code
FALLING WATERS	WV	25419

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

45.00

Transaction ID : SB17.I1243

C. BUFFALO WILD WINGS

Mailing Address 4 NORTHRIDGE DR., SUITE 100

City	State	Zip Code
BUCKHANNON	WV	26201

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.I1210

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

195.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CALIFORNIA TORTILLA

Mailing Address 270 OAK LEE DR.

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		27		2015

Amount of Each Disbursement this Period

24.24

Transaction ID : SB17.I1267

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I1269

C. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		21		2015

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17.I1298

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

924.24

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CAPITOL HOST

Mailing Address 339B RAYBURN HOB

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2015

City	State	Zip Code
WASHINGTON	DC	20515

Purpose of Disbursement
CATERING

Amount of Each Disbursement this Period

87.85

Transaction ID : SB17.I1216

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. CAPITOL HOST

Mailing Address 339B RAYBURN HOB

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2015

City	State	Zip Code
WASHINGTON	DC	20515

Purpose of Disbursement
FOOD/BEVERAGE

Amount of Each Disbursement this Period

36.90

Transaction ID : SB17.I1235

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. CAPITOL HOST

Mailing Address 339B RAYBURN HOB

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2015

City	State	Zip Code
WASHINGTON	DC	20515

Purpose of Disbursement
FOOD/BEVERAGE

Amount of Each Disbursement this Period

33.90

Transaction ID : SB17.I1263

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

158.65

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 58 OF 84

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CAPITOL HOST

Mailing Address 339B RAYBURN HOB

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		07		2015

City	State	Zip Code
WASHINGTON	DC	20515

Amount of Each Disbursement this Period

12	07	2015	20.45
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Purpose of Disbursement
FOOD/BEVERAGECategory/
Type

Transaction ID : SB17.I1264

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. CHICK FIL-A

Mailing Address 1005 FOXCROFT AVE.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

City	State	Zip Code
MARTINSBURG	WV	25401

Amount of Each Disbursement this Period

11	30	2015	38.13
----	----	------	-------

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type

Transaction ID : SB17.I1268

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. CLAY CENTER

Mailing Address 1 CLAY CENTER

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

City	State	Zip Code
CHARLESTON	WV	25301

Amount of Each Disbursement this Period

11	09	2015	85.00
----	----	------	-------

Purpose of Disbursement
REGISTRATION FEECategory/
Type

Transaction ID : SB17.I1245

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

143.58

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

798.00

Purpose of Disbursement
COMPLIANCE CONSULTINGCategory/
Type

Transaction ID : SB17.I1232

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		24		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

798.00

Purpose of Disbursement
COMPLIANCE CONSULTINGCategory/
Type

Transaction ID : SB17.I1261

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		24		2015

City	State	Zip Code
TYSONS CORNER	VA	22182

Amount of Each Disbursement this Period

798.00

Purpose of Disbursement
COMPLIANCE CONSULTINGCategory/
Type

Transaction ID : SB17.I1309

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2394.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 84

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. COMCAST COMMUNICATIONS

Mailing Address PO BOX 3005

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		10		2015

City	State	Zip Code
SOUTHEASTERN	PA	19398

Amount of Each Disbursement this Period

124.09

Purpose of Disbursement
UTILITIESCategory/
Type

Transaction ID : SB17.I1247

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. COMCAST COMMUNICATIONS

Mailing Address PO BOX 3005

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2015

City	State	Zip Code
SOUTHEASTERN	PA	19398

Amount of Each Disbursement this Period

124.09

Purpose of Disbursement
UTILITIESCategory/
Type

Transaction ID : SB17.I1289

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. CONNECTA CELL & PC

Mailing Address 832 E WASHINGTON ST.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Amount of Each Disbursement this Period

37.09

Purpose of Disbursement
COMPUTER SUPPORTCategory/
Type

Transaction ID : SB17.I1262

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

285.27

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. COUNTRY INN OF BERKELEY SPRINGS

Mailing Address 110 S. WASHINGTON ST.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		23		2015

City	State	Zip Code
BERKELEY SPRINGS	WV	25411

Amount of Each Disbursement this Period

381.22

Purpose of Disbursement
CATERINGCategory/
Type

Transaction ID : SB17.I1304

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. FOX ROTHSCHILD LLP

Mailing Address 1030 15TH ST. NW SUITE 380

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2015

City	State	Zip Code
WASHINGTON	DC	20005

Amount of Each Disbursement this Period

1170.00

Purpose of Disbursement
LEGAL CONSULTINGCategory/
Type

Transaction ID : SB17.I1283

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. FRONTIER COMMUNICATIONS

Mailing Address 1398 S. WOODLAND BLVD. SUITE B

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2015

City	State	Zip Code
DELAND	FL	32720

Amount of Each Disbursement this Period

171.60

Purpose of Disbursement
UTILITIESCategory/
Type

Transaction ID : SB17.I1223

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1722.82

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. FRONTIER COMMUNICATIONS

Mailing Address 1398 S. WOODLAND BLVD. SUITE B

City	State	Zip Code
DELAND	FL	32720

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 22 / 2015

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.I1302

B. GANDY DANCER THEATER

Mailing Address 359 BEVERLY PIKE

City	State	Zip Code
ELKINS	WV	26241

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 02 / 2015

Amount of Each Disbursement this Period

119.85

Transaction ID : SB17.I1208

FUNDRAISER

C. HOLIDAY INN EXPRESS

Mailing Address MARTIN ST.

City	State	Zip Code
ELKINS	WV	26241

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 05 / 2015

Amount of Each Disbursement this Period

459.20

Transaction ID : SB17.I1211

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

679.05

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 63 OF 84

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. LEDO PIZZA

Mailing Address 217 OAK LEE DR. #1

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2015

Amount of Each Disbursement this Period

50.90

Transaction ID : SB17.I1252

B. MAGNOLIAS AT THE MILL

Mailing Address 198 N 21ST

City	State	Zip Code
PURCELLVILLE	VA	20132

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

Amount of Each Disbursement this Period

37.49

Transaction ID : SB17.I1310

C. MARTINS

Mailing Address 190 FLOWING SPRINGS RD.

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2015

Amount of Each Disbursement this Period

153.52

Transaction ID : SB17.I1241

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

241.91

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. MARTINS

Mailing Address 190 FLOWING SPRINGS RD.

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2015

Amount of Each Disbursement this Period

82.97

Transaction ID : SB17.I1272

B. MARTINS FUEL

Mailing Address RTE. 340 & 17

City	State	Zip Code
CHARLES TOWN	WV	25414

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2015

Amount of Each Disbursement this Period

19.99

Transaction ID : SB17.I1271

C. MINUTEMAN PRESS PRINTING

Mailing Address 111 S. QUEEN ST.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2015

Amount of Each Disbursement this Period

64.87

Transaction ID : SB17.I1287

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

167.83

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 66 OF 84

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. OFFICEMAX

Mailing Address 745 FOXCROFT AVE.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2015

Amount of Each Disbursement this Period

4	3	2	1	0	9	8	7	6	5	4	3	2	1	0	.	9	8	7	6	5	4	3	2	1	0
																	5	8	7						

Transaction ID : SB17.I1221

B. RESIDENCE INN

Mailing Address 455 HIBISCUS ST.

City	State	Zip Code
WEST PALM BEACH	FL	33401

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		22		2015

Amount of Each Disbursement this Period

4	3	2	1	0	9	8	7	6	5	4	3	2	1	0	.	8	8					
																	1	6	6	.	8	8

Transaction ID : SB17.I1227

C. ROCS CONVENIENCE STORE

Mailing Address 1100 SHEPHERDSTOWN RD.

City	State	Zip Code
MARTINSBURG	WV	25401

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		24		2015

Amount of Each Disbursement this Period

4	3	2	1	0	9	8	7	6	5	4	3	2	1	0	.	3	5					
																	2	5	6	.	3	5

Transaction ID : SB17.I1260

GAS CARDS

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4	3	2	1	0	9	8	7	6	5	4	3	2	1	0	.	1	0					
																	4	2	9	.	1	0

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. ROY ROGERS

Mailing Address 144 OAK LEE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

City	State	Zip Code
RANSON	WV	25438

Amount of Each Disbursement this Period

17.34

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type

Transaction ID : SB17.I1258

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. RUBY TUESDAY

Mailing Address 960 FOXCROFT AVE.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2015

City	State	Zip Code
MARTINSBURG	WV	25401

Amount of Each Disbursement this Period

20.63

Purpose of Disbursement
FOOD/BEVERAGECategory/
Type

Transaction ID : SB17.I1214

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. SHELL

Mailing Address 78 SOMERSET BLVD.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2015

City	State	Zip Code
CHARLES TOWN	WV	02544

Amount of Each Disbursement this Period

24.64

Purpose of Disbursement
TRAVELCategory/
Type

Transaction ID : SB17.I1209

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

62.61

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address 78 SOMERSET BLVD.

City	State	Zip Code
CHARLES TOWN	WV	02544

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2015

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.I1220

B. SHELL

Mailing Address 78 SOMERSET BLVD.

City	State	Zip Code
CHARLES TOWN	WV	02544

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2015

Amount of Each Disbursement this Period

17.63

Transaction ID : SB17.I1229

C. SHELL

Mailing Address 78 SOMERSET BLVD.

City	State	Zip Code
CHARLES TOWN	WV	02544

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2015

Amount of Each Disbursement this Period

24.59

Transaction ID : SB17.I1239

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

67.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address 78 SOMERSET BLVD.

City	State	Zip Code
CHARLES TOWN	WV	02544

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		24		2015

Amount of Each Disbursement this Period

18.18

Transaction ID : SB17.I1259

B. SHELL

Full Name (Last, First, Middle Initial)

Mailing Address 78 SOMERSET BLVD.

City	State	Zip Code
CHARLES TOWN	WV	02544

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2015

Amount of Each Disbursement this Period

22.94

Transaction ID : SB17.I1270

C. SHELL

Full Name (Last, First, Middle Initial)

Mailing Address 78 SOMERSET BLVD.

City	State	Zip Code
CHARLES TOWN	WV	02544

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		07		2015

Amount of Each Disbursement this Period

20.50

Transaction ID : SB17.I1275

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

61.62

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address 78 SOMERSET BLVD.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		21		2015

City	State	Zip Code
CHARLES TOWN	WV	02544

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

48.00

Transaction ID : SB17.I1299

B. SOSA & ASSOCIATES SERVICES, LLC

Mailing Address 1812 GILSON STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		07		2015

City	State	Zip Code
FALLS CHURCH	VA	22043

Purpose of Disbursement
CATERING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

451.09

Transaction ID : SB17.I1277

C. SOSA & ASSOCIATES SERVICES, LLC

Mailing Address 1812 GILSON STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		10		2015

City	State	Zip Code
FALLS CHURCH	VA	22043

Purpose of Disbursement
CATERING

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.I1279

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1099.09

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. SOSA & ASSOCIATES SERVICES, LLC

Mailing Address 1812 GILSON STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		21		2015

City	State	Zip Code
FALLS CHURCH	VA	22043

Amount of Each Disbursement this Period

1565.13

Purpose of Disbursement
CATERINGCategory/
Type

Transaction ID : SB17.I1301

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 160 PATRICK HENRY WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Amount of Each Disbursement this Period

569.65

Purpose of Disbursement
OFFICE SUPPLIESCategory/
Type

Transaction ID : SB17.I1231

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 160 PATRICK HENRY WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		22		2015

City	State	Zip Code
CHARLES TOWN	WV	25414

Amount of Each Disbursement this Period

20.07

Purpose of Disbursement
OFFICE SUPPLIESCategory/
Type

Transaction ID : SB17.I1307

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2154.85

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. SUNCO

Mailing Address 1422 BLAIR RD.

City	State	Zip Code
HALLTOWN	WV	25423

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2015

Amount of Each Disbursement this Period

41.00

Transaction ID : SB17.I1222

B. SUNCO

Mailing Address 1422 BLAIR RD.

City	State	Zip Code
HALLTOWN	WV	25423

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

Amount of Each Disbursement this Period

13.00

Transaction ID : SB17.I1311

C. SWEET SPRINGS LIBERTY

Mailing Address 34357 CHARLES TOWN PIKE

City	State	Zip Code
PURCELLVILLE	VA	20132

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I1242

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

74.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. SWEET SPRINGS LIBERTY

Mailing Address 34357 CHARLES TOWN PIKE

City	State	Zip Code
PURCELLVILLE	VA	20132

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2015

Amount of Each Disbursement this Period

191.01

Transaction ID : SB17.I1248

B. SWEET SPRINGS LIBERTY

Mailing Address 34357 CHARLES TOWN PIKE

City	State	Zip Code
PURCELLVILLE	VA	20132

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2015

Amount of Each Disbursement this Period

11.28

Transaction ID : SB17.I1256

C. TARGET

Mailing Address 436 RETAIL COMMONS PKWY

City	State	Zip Code
MARTINSBURG	WV	25403

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		11		2015

Amount of Each Disbursement this Period

156.72

Transaction ID : SB17.I1280

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

191.01

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 84

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. THE CANNON GROUP LLCMailing Address 1001 PENNSYLVANIA AVE. NW
SUITE 1300 N

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		02		2015

Amount of Each Disbursement this Period

5098.54

Transaction ID : SB17.I1238

B. THE CANNON GROUP LLCMailing Address 1001 PENNSYLVANIA AVE. NW
SUITE 1300 N

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2015

Amount of Each Disbursement this Period

4294.50

Transaction ID : SB17.I1285

C. THE CANNON GROUP LLCMailing Address 1001 PENNSYLVANIA AVE. NW
SUITE 1300 N

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2015

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.I1286

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

13393.04

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. THE CATALYST GROUP

Mailing Address 600 PENNSYLVANIA AVE. SE SUITE 330

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
POLITICAL CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 07 / 2015

Amount of Each Disbursement this Period

2990.00

Transaction ID : SB17.I1273

B. THE CATALYST GROUP

Mailing Address 600 PENNSYLVANIA AVE. SE SUITE 330

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
POLITICAL CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 10 / 2015

Amount of Each Disbursement this Period

180.00

Transaction ID : SB17.I1274

C. THE CONGRESSIONAL INSTITUTE

Mailing Address 1700 DIAGONAL RD.

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
REGISTRATION FEE/TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 18 / 2015

Amount of Each Disbursement this Period

2111.00

Transaction ID : SB17.I1293

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5281.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. THE GREENHOUSE

Mailing Address 3554 TEAYS VALLEY RD. #105

City	State	Zip Code
HURRICANE	WV	25526

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2015

Amount of Each Disbursement this Period

950.00

Transaction ID : SB17.I1291

B. THE LEADERSHIP INSTITUTE

Mailing Address 1101 N HIGHLAND ST

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement
POLITICAL TRAINING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		16		2015

Amount of Each Disbursement this Period

85.00

Transaction ID : SB17.I1254

C. TRAVELOCITY

Mailing Address

City	State	Zip Code
SOUTHLAKE	TX	76092

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2015

Amount of Each Disbursement this Period

138.24

Transaction ID : SB17.I1215

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1173.24

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		13		2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I1228

B. USPS

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2015

Amount of Each Disbursement this Period

2450.00

Transaction ID : SB17.I1237

c. USPS

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2015

Amount of Each Disbursement this Period

225.00

Transaction ID : SB17.I1251

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3675.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 84

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 1355 COURTHOUSE DR

City	State	Zip Code
MARTINSBURG	WV	21701

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2015

Amount of Each Disbursement this Period

771.59

Transaction ID : SB17.I1288

B. VERIZON

Mailing Address PO BOX 4003

City	State	Zip Code
ACWORTH	GA	30101

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

551.60

Transaction ID : SB17.I1246

C. VERIZON

Mailing Address PO BOX 4003

City	State	Zip Code
ACWORTH	GA	30101

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		21		2015

Amount of Each Disbursement this Period

200.00

Transaction ID : SB17.I1303

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

771.59

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 80 OF 84

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. WALMART

Mailing Address 96 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	02544

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2015

Amount of Each Disbursement this Period

64.48

Transaction ID : SB17.I1219

B. WALMART

Mailing Address 96 PATRICK HENRY WAY

City	State	Zip Code
CHARLES TOWN	WV	02544

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2015

Amount of Each Disbursement this Period

85.25

Transaction ID : SB17.I1240

C. WEIS MARKETS

Mailing Address 217 OAK LEE DR. #15

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2015

Amount of Each Disbursement this Period

38.00

Transaction ID : SB17.I1230

GAS

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

187.73

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 81 OF 84

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. WEIS MARKETS

Mailing Address 217 OAK LEE DR. #15

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2015

Amount of Each Disbursement this Period

19.25

Transaction ID : SB17.I1249

GAS

B. WEIS MARKETS

Mailing Address 217 OAK LEE DR. #15

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2015

Amount of Each Disbursement this Period

52.00

Transaction ID : SB17.I1250

GAS

C. WEIS MARKETS

Mailing Address 217 OAK LEE DR. #15

City	State	Zip Code
RANSON	WV	25438

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		25		2015

Amount of Each Disbursement this Period

50.62

Transaction ID : SB17.I1265

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

121.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 83 OF 84

<input type="checkbox"/> 17	<input checked="" type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Mooney for Congress

Full Name (Last, First, Middle Initial)

A. WVGOP

Mailing Address PO BOX 2711

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		14		2015

City	State	Zip Code
CHARLESTON	WV	25330

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
TRANSFERCategory/
Type

Transaction ID : SB18.I1284

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

2000.00

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 84 OF 84

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Mooney for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Conquest Communication

Nature of Debt (Purpose):

Message Phone Calls

Mailing Address 2812 Emerywood Pky Ste. 103

City State

Zip Code

Richmond

VA

23294

Outstanding Balance Beginning This Period

25934.00

Transaction ID : 0003

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25934.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

25934.00

2) **TOTALS** This Period (last page this line number only)

25934.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

25934.00